Fill ir	n this information to identify your case:			
Debte				
Dalar	First Name Middle Name Last Name			
Debto (Spous	se if, filing) First Name Middle Name Last Name			
Unite	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI			
Case	e number			
(if knov	wn)		_	if this is an ded filing
			amen	dea ming
⊃ffi	icial Form 106Sum			
	nmary of Your Assets and Liabilities and Certain Statistica	al Information		12/15
nforn	s complete and accurate as possible. If two married people are filing together, both are mation. Fill out all of your schedules first; then complete the information on this form. If original forms, you must fill out a new Summary and check the box at the top of this pa	f you are filing amende		
			Your as	ssets If what you own
	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	145,650.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	15,550.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	161,200.00
Part 2	<u> </u>		·	, ,
				abilities t you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of F	Part 1 of Schedule D	\$	121,144.68
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	=	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule</i>	E/F	\$	59,339.92
		Your total liabilities	\$	180,484.60
		Tour total nashines		100,404.00
Part 3	3: Summarize Your Income and Expenses			
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	3,065.66
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	3,041.00
Part 4	4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form.	orm to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?			
	■ Your debts are primarily consumer debts. Consumer debts are those "incurred by an household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.		a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part	of the form. Check this	box and s	ubmit this form to

Official Form 106Sum

the court with your other schedules.

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 2 of 53

Debtor 1 Denise M Whitehead Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form

3. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,267.62

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total claim	1
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1	Denise M Wh	nitehead			
	First Name	Middle	e Name Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle	Name Last Name		
United States B	Bankruptcy Court for	the: SOUTHER	N DISTRICT OF MISSISSIPPI		
Case number					☐ Check if this is an amended filing
Official E	o moo 106 A /D				
	orm 106A/B	•			
<u>scneau</u>	le A/B: Pr	operty			12/15
	r have any legal or eq		her Real Estate You Own or Have an Interest In any residence, building, land, or similar property?		
Yes Where	e is the property?				
309 Mallo	ory Drive s, if available, or other desc	cription	What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative	the amount of any sec	l claims or exemptions. Put ured claims on Schedule D: claims Secured by Property.
309 Mallo		oription	■ Single-family home □ Duplex or multi-unit building	the amount of any sec	ured claims on <i>Schedule D:</i>
Street address	s, if available, or other desc		■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home	the amount of any sec Creditors Who Have C	ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
309 Mallo Street address	s, if available, or other desc	39272-0000	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	the amount of any sec Creditors Who Have Control Courrent value of the entire property? \$145,650.00	current value of the portion you own? 145,650.00 15 your ownership interest
309 Mallo Street address	s, if available, or other desc	39272-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	the amount of any sec Creditors Who Have Comment value of the entire property? \$145,650.00 Describe the nature of (such as fee simple, a life estate), if know	Current value of the portion you own? \$\frac{1}{2}\$ \text{Surrent value of the portion you own?} \text{Surrent value of the portion you own.} Surrent
309 Mallo Street address Byram City	s, if available, or other desc	39272-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	the amount of any sec Creditors Who Have Comment value of the entire property? \$145,650.00 Describe the nature of (such as fee simple,	Current value of the portion you own? \$\frac{1}{2}\$ \text{Surrent value of the portion you own?} \text{Surrent value of the portion you own.} Surrent
309 Mallo Street address	s, if available, or other desc	39272-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	current value of the entire property? \$145,650.00 Describe the nature of (such as fee simple, a life estate), if know Fee simple Check if this is of (see instructions)	Current value of the portion you own? 1 45,650.00 1 your ownership interest tenancy by the entireties, or
309 Mallo Street address Byram City Hinds	s, if available, or other desc	39272-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	current value of the entire property? \$145,650.00 Describe the nature of (such as fee simple, a life estate), if know Fee simple Check if this is of (see instructions)	Current value of the portion you own? \$\frac{1}{2}\$ \$\frac{1}{2}

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 4 of 53

Debtor 1 Denise M Whitehead					Case number (if known)			
3. (Cars, vans	, trucks, tractors, spo	rt utility ve	hicles, motorcycles				
	J No							
	Yes							
					5			
3.	3.1 Make: Ford			Who has an interest in the property? Check one	the amount of any	ured claims or exemptions. Put secured claims on Schedule D:		
	Model:	Escape		■ Debtor 1 only	Creditors Who Hav	ve Claims Secured by Property.		
	Year:	2015 mate mileage:	62.000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?		
		formation:	02,000	☐ At least one of the debtors and another	chare property :	portion you own.		
					*			
				Check if this is community property (see instructions)	\$11,250	.00 \$11,250.00		
E □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	■ No ■ Yes	Boats, trailers, motors, posters, poste	oersonal wa	d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycon for all of your entries from Part 2, including	cle accessories g any entries for	\$11,250.00		
	pages you	have attached for Pa	rt 2. Write 1	that number here	=>	\$11,250.00		
Pai	t 3: Descr	ibe Your Personal and H	lousehold Ite	ems				
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
		goods and furnishing Major appliances, furnitescribe		, china, kitchenware				
		hhgs a	and electr	onics		\$3,000.00		
	_			eo, stereo, and digital equipment; computers, pr ledia players, games	rinters, scanners; music co	ollections; electronic devices		
	■ No □ Yes. De	a a criba						
	Li res. De	scribe						
	_			prints, or other artwork; books, pictures, or other	er art objects; stamp, coin,	or baseball card collections;		
	■ No □ Yes. De	escribe						
	Examples:	for sports and hobbi Sports, photographic, e musical instruments		d other hobby equipment; bicycles, pool tables,	, golf clubs, skis; canoes a	and kayaks; carpentry tools;		
	■ No □ Yes. De	escribe						
	Firearms Examples □ No	s: Pistols, rifles, shotgur	ns, ammunit	tion, and related equipment				
	Yes. De	escribe						

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 5 of 53

Debto	or 1 Denise M W	'hitehead	Case number (if known	1)
				-
		9 mm pistol .22 rifle		\$300.00
	xamples: Everyday cl	lothes, furs, leather coats, des	igner wear, shoes, accessories	
		clothing		\$800.00
13. N o	<i>xamples:</i> Everyday je		gement rings, wedding rings, heirloom jewelry, watches, gems	, gold, silver
14. A r ■	•	•	not already list, including any health aids you did not list	
		_	art 3, including any entries for pages you have attached	\$4,100.00
- · ·	-			
	Describe Your Finar	icial Assets legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	xamples: Money you	have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your pet	ition
	institutions.		ounts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	e houses, and other similar
	Yes		Institution name:	
		17.1. Checking	Members Exchange CU	\$100.00
		17.2. Savings	Members Exchange Cu	\$100.00
	xamples: Bond funds	or publicly traded stocks , investment accounts with bro	okerage firms, money market accounts	
	Yes	Institution or issuer	name:	
	oint venture	tock and interests in incorpo	orated and unincorporated businesses, including an intere	est in an LLC, partnership, and
_		formation about them		
Official	I Form 106A/B		Schedule A/B: Property	page 3

De	ebtor 1 De i	nise M Whitehead	Case number (if know	vn)
		Name of entity:	% of ownership:	
	Negotiable i	instruments include personal checks, cas	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	☐ Yes. Give	specific information about them Issuer name:		
		or pension accounts nterests in IRA, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-shari	ng plans
		ach account separately. Type of account:	Institution name:	
	Your share of Examples: A	posits and prepayments of all unused deposits you have made so Agreements with landlords, prepaid rent, p	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications com	panies, or others
	■ No □ Yes		Institution name or individual:	
23.	Annuities (A	contract for a periodic payment of mone	ey to you, either for life or for a number of years)	
	■ No	lancar range and description		
	☐ Yes			
		an education IRA, in an account in a qu 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition	program.
	☐ Yes	Institution name and description	n. Separately file the records of any interests.11 U.S.C. § 521	(c):
	Trusts, equi ■ No	table or future interests in property (of	ther than anything listed in line 1), and rights or powers (exercisable for your benefit
	☐ Yes. Give	specific information about them		
	Examples: İı	pyrights, trademarks, trade secrets, an internet domain names, websites, proceed	d other intellectual property ds from royalties and licensing agreements	
	■ No □ Yes. Give	specific information about them		
		anchises, and other general intangible Building permits, exclusive licenses, coop	es erative association holdings, liquor licenses, professional lice	enses
		specific information about them		
Мс	oney or prope	erty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ■ No	owed to you		
		specific information about them, including	g whether you already filed the returns and the tax years	
	_ ·		upport, child support, maintenance, divorce settlement, prope	erty settlement
	■ No □ Yes. Give	specific information		
30.	Examples: \	nts someone owes you Inpaid wages, disability insurance payme penefits; unpaid loans you made to some	ents, disability benefits, sick pay, vacation pay, workers' com one else	pensation, Social Security
	■ No □ Yes. Give	specific information		

Debtor 1	Denise M Whitehead	Case number (if known)	
	sts in insurance policies uples: Health, disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's insurar	nce
☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If you some No	nterest in property that is due you from someone who has do are the beneficiary of a living trust, expect proceeds from a life one has died. Give specific information		eive property because
Exam ■ No	s against third parties, whether or not you have filed a laws apples: Accidents, employment disputes, insurance claims, or right.		
■ No	contingent and unliquidated claims of every nature, including the continuous	ng counterclaims of the debtor and rights to	o set off claims
■ No	nancial assets you did not already list . Give specific information		
	the dollar value of all of your entries from Part 4, including Part 4. Write that number here		\$200.00
Part 5: De	escribe Any Business-Related Property You Own or Have an Interes	t In. List any real estate in Part 1.	
37. Do yo u	own or have any legal or equitable interest in any business-related	property?	
■ No. G	o to Part 6.		
☐ Yes.	Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You O you own or have an interest in farmland, list it in Part 1.	wn or Have an Interest In.	
46. Do yo	u own or have any legal or equitable interest in any farm- o	commercial fishing-related property?	
	. Go to Part 7.		
☐ Ye	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You D	oid Not List Above	
	u have other property of any kind you did not already list? pples: Season tickets, country club membership		
☐ Yes.	Give specific information		
54. Add	the dollar value of all of your entries from Part 7. Write that	number here	\$0.00

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 8 of 53

Debtor 1 Denise M Whitehead		Case number (if known)	
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$145,650.00
56. Part 2: Total vehicles, line 5	\$11,250.00		
57. Part 3: Total personal and household items, line 15	\$4,100.00		
58. Part 4: Total financial assets, line 36	\$200.00		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54 +	\$0.00		
62. Total personal property. Add lines 56 through 61	\$15,550.00	Copy personal property total	\$15,550.00
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$161,200.00

Fil	II in this inforn	nation to identify your case:				
De	ebtor 1	Denise M Whitehead				
		First Name	Middle Name	L	ast Name	
1 '	ebtor 2 ouse if, filing)	First Name	Middle Name	L	_ast Name	
``		nkruptcy Court for the: SOU	THERN DISTRICT OF	MISS	ISSIPPI	
	ase number (nown)					☐ Check if this is an amended filing
		rm 106C	rty Vou Clo	ina	oo Evemnt	
<u> </u>	chedui	e C: The Prope	rty You Cla	ШП	i as Exempt	4/19
the nee cas	property you li eded, fill out an se number (if kr	sted on Schedule A/B: Property d attach to this page as many conown).	r (Official Form 106A/B) opies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you	additional pages, write your name and
spe any fun exe	ecific dollar an	nount as exempt. Alternatively atutory limit. Some exemption Inlimited in dollar amount. Ho	y, you may claim the f ns—such as those for wever, if you claim an	ull fa heal exer	ir market value of the property bei th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	rt 1: Identif	y the Property You Claim as I	Exempt			
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	You are cla	aiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	aiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any prop	perty you list on Schedule A/E	that you claim as exe	empt,	fill in the information below.	
		on of the property and line on that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	309 Mallory Hinds Cour	Drive Byram, MS 39272	\$145,650.00		\$44,008.24	Miss. Code Ann. § 85-3-21
		hedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
		Escape 62,000 miles	\$11,250.00		\$5,900.00	Miss. Code Ann. § 85-3-1(a)
	Line from Scl	hedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	

clothing
Line from Schedule A/B: 11.1

9 mm pistol

.22 rifle

hhgs and electronics

Line from Schedule A/B: 6.1

Line from Schedule A/B: 10.1

\$800.00

\$300.00

\$3,000.00

\$800.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$3,000.00

\$300.00

Miss. Code Ann. § 85-3-1(a)

Miss. Code Ann. § 85-3-1(a)

Miss. Code Ann. § 85-3-1(a)

100% of fair market value, up to any applicable statutory limit

Official Form 106C

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 10 of 53

Del	btor 1	Denis	se M Whitehead	Case number (if known)	
3.	•		ming a homestead exemption of more than \$170,350? djustment on 4/01/22 and every 3 years after that for cases filed on or	r after the date of adjustment.)	
		No			
		Yes. Di	d you acquire the property covered by the exemption within 1,215 day	s before you filed this case?	
	ľ		lo		
	!	□ Y	'es		

Fill in this information to	identify your	case:				
	e M Whiteh					
First Nan		Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First Nan	ne	Middle Name	Last Name			
United States Bankruptcy C	Court for the:	SOUTHERN DISTRICT OF MIS	SISSIPPI			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
O(('.' F 400B						
Official Form 106D	-					
Schedule D: Cr	editors	Who Have Claims S	Secure	d by Property	/	12/15
		two married people are filing togethe ut, number the entries, and attach it to				
1. Do any creditors have clain	ns secured by	your property?				
☐ No. Check this box a	and submit th	is form to the court with your other s	schedules. Y	ou have nothing else to	report on this form.	
Yes. Fill in all of the	information h	elow.		-		
		olow.				
			Pr.	Column A	Column B	Column C
for each claim. If more than or	e creditor has	ore than one secured claim, list the cred a particular claim, list the other creditors al order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ford Motor Credit	Со	Describe the property that secures the	he claim:	\$11,637.77	\$0.00	\$11,637.77
Creditor's Name		2015 Ford Escape				
		•				
DOD 540000	l	As of the date you file, the claim is: 0	Check all that			
POB 542000 Omaha, NE 68154		apply.				
Number, Street, City, State 8		Contingent				
Number, Street, City, State of	Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check	one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	nortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, med	hanic's lien)			
☐ At least one of the debtors	and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates	s to a	☐ Other (including a right to offset)				
community debt						
Date debt was incurred		Last 4 digits of account numb	er <u>5114</u>			
2.2 US Bank Home Me	ortgage	Describe the property that secures the	he claim:	\$101,641.76	\$145,650.00	\$0.00
Creditor's Name		309 Mallory Drive Byram, MS Hinds County			<u> </u>	
4004 E . I. I. O.		As of the date you file, the claim is: 0	Check all that			
4801 Frederica St. Owensboro, KY 42		apply.				
		Contingent				
Number, Street, City, State 8	a Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check	one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	nortgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, med	hanic's lien)			
☐ At least one of the debtors		☐ Judgment lien from a lawsuit	,			
Check if this claim relates community debt		☐ Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account numb	er			

Official Form 106D

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 12 of 53

Debtor 1 Denise M Whitehead		Case number (if known)			
First Name Middle I	Name Last Name				
2.3 Vanderbilt Mortgage	Describe the property that secures the claim:	\$7,865.15	\$0.00	\$7,865.15	
Creditor's Name	Windows				
Finance, Inc	As of the date you file, the claim is: Check all that				
POB 9800 Maryville, TN 37802	apply. Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number 5118	8			
Add the dollar value of your entries in	Column A on this page. Write that number here:	\$121,144.68			
If this is the last page of your form, add	d the dollar value totals from all pages.	\$121,144.68			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		-			
Debtor 1	Denise M Whitehe	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	SOUTHERN DISTRICT OF N	/ISSISSIPPI		
Case numbe	r				Check if this is an amended filing
Schedul		no Have Unsecured			12/15
any executory Schedule G: E Schedule D: C eft. Attach the name and case	contracts or unexpired leases xecutory Contracts and Unexpi reditors Who Have Claims Secu Continuation Page to this page e number (if known).	hat could result in a claim. Also ed Leases (Official Form 106G). red by Property. If more space is . If you have no information to r	list executory c Do not include a needed, copy t	Part 2 for creditors with NONPRIORITY contracts on Schedule A/B: Property (Offany creditors with partially secured clain he Part you need, fill it out, number the colon tile that Part. On the top of any ad	icial Form 106A/B) and on ns that are listed in entries in the boxes on the
	st All of Your PRIORITY Uns				
_ ′	editors have priority unsecured	claims against you?			
_	to Part 2.				
☐ Yes.					
	st All of Your NONPRIORIT				
3. Do any cr	editors have nonpriority unsec	red claims against you?			
☐ No. Yo	ou have nothing to report in this pa	rt. Submit this form to the court wit	h your other sche	dules.	
Yes.					
4. List all of unsecured	I claim, list the creditor separately	for each claim. For each claim liste	ed, identify what ty	holds each claim. If a creditor has more type of claim it is. Do not list claims already three nonpriority unsecured claims fill out the	ncluded in Part 1. If more
4. List all of unsecured than one of	I claim, list the creditor separately	for each claim. For each claim liste	ed, identify what ty	ype of claim it is. Do not list claims already	ncluded in Part 1. If more
4. List all of unsecured than one of Part 2.	I claim, list the creditor separately	for each claim. For each claim liste	ed, identify what ty u have more than	ype of claim it is. Do not list claims already	ncluded in Part 1. If more ne Continuation Page of
4. List all of unsecured than one of Part 2. 4.1 Among None	d claim, list the creditor separately creditor holds a particular claim, lis	for each claim. For each claim liste t the other creditors in Part 3.If you	ed, identify what to a have more than count number	pe of claim it is. Do not list claims already three nonpriority unsecured claims fill out the	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P	claim, list the creditor separately creditor holds a particular claim, list creditor holds a particular claim, list creditor Express riority Creditor's Name 3 981537 caso, TX 79998	for each claim. For each claim liste t the other creditors in Part 3.If you Last 4 digits of ac When was the del	ed, identify what to a have more than account number bt incurred?	ype of claim it is. Do not list claims already ithree nonpriority unsecured claims fill out the	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P Numl	erican Express riority Creditor's Name 3 981537 aso, TX 79998 per Street City State Zip Code	for each claim. For each claim liste t the other creditors in Part 3.If you Last 4 digits of ac When was the del	ed, identify what to a have more than account number bt incurred?	pe of claim it is. Do not list claims already three nonpriority unsecured claims fill out the	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P Numl Who	claim, list the creditor separately creditor holds a particular claim, list creditor holds a particular claim, list creditor below the control of the contro	for each claim. For each claim liste t the other creditors in Part 3.If you Last 4 digits of ac When was the del As of the date you	ed, identify what to a have more than account number bt incurred?	ype of claim it is. Do not list claims already ithree nonpriority unsecured claims fill out the	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P Numi Who	claim, list the creditor separately creditor holds a particular claim, list creditor holds a particular claim, list creditor holds a particular claim, list creditor is Name 3 981537 class, TX 79998 cer Street City State Zip Code incurred the debt? Check one. ebtor 1 only	for each claim. For each claim liste t the other creditors in Part 3.If you Last 4 digits of ac When was the del As of the date you Contingent	ed, identify what to a have more than account number bt incurred?	ype of claim it is. Do not list claims already ithree nonpriority unsecured claims fill out the	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P Numl Who D D D	erican Express riority Creditor's Name 3 981537 aso, TX 79998 per Street City State Zip Code incurred the debt? Check one. ebtor 1 only ebtor 2 only	for each claim. For each claim liste t the other creditors in Part 3.If you Last 4 digits of ac When was the del As of the date you Contingent Unliquidated	ed, identify what to a have more than account number bt incurred?	ype of claim it is. Do not list claims already ithree nonpriority unsecured claims fill out the	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P Numl Who D D D D	erican Express riority Creditor's Name 3 981537 aso, TX 79998 per Street City State Zip Code incurred the debt? Check one. ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed	ed, identify what to a have more than ecount number but incurred? a file, the claim is	ype of claim it is. Do not list claims already ithree nonpriority unsecured claims fill out the second	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Amore Nonp POE EI P Numl Who	erican Express riority Creditor's Name 3 981537 4 aso, TX 79998 Der Street City State Zip Code incurred the debt? Check one. ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only t least one of the debtors and ano	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO	ed, identify what to a have more than ecount number but incurred? a file, the claim is	ype of claim it is. Do not list claims already ithree nonpriority unsecured claims fill out the second	ncluded in Part 1. If more ne Continuation Page of Total claim
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P Numl Who D D D D A C debt	erican Express riority Creditor's Name 3 981537 4 aso, TX 79998 Der Street City State Zip Code incurred the debt? Check one. debtor 1 only debtor 2 only debtor 1 and Debtor 2 only t least one of the debtors and ano heck if this claim is for a comme	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO Student loans Obligations aris	ed, identify what to a have more than account number but incurred? a file, the claim is	ype of claim it is. Do not list claims already ithree nonpriority unsecured claims fill out the second	ncluded in Part 1. If more ne Continuation Page of Total claim \$922.73
4. List all of unsecured than one of Part 2. 4.1 Ame Nonp POE EI P Numl Who D D D C debt Is the	erican Express riority Creditor's Name 3 981537 aso, TX 79998 ber Street City State Zip Code incurred the debt? Check one. ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only t least one of the debtors and ano heck if this claim is for a comme e claim subject to offset?	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO Student loans Obligations aris report as priority cle	ed, identify what ty I have more than count number bt incurred? If the claim is ORITY unsecured sing out of a separating	ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out the 1002 S: Check all that apply I claim: ration agreement or divorce that you did no	ncluded in Part 1. If more ne Continuation Page of Total claim \$922.73
4. List all of unsecured than one of Part 2. 4.1 Amore Nonp POE EI P Numl Who D D D D D D C C debt	erican Express riority Creditor's Name 3 981537 aso, TX 79998 per Street City State Zip Code incurred the debt? Check one. ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only t least one of the debtors and ano heck if this claim is for a comme e claim subject to offset?	Last 4 digits of ac When was the del As of the date you Contingent Unliquidated Disputed Type of NONPRIO Student loans Obligations aris report as priority cle	ed, identify what ty I have more than count number bt incurred? If the claim is ORITY unsecured sing out of a separating	ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out the second	ncluded in Part 1. If more ne Continuation Page of Total claim \$922.73

Debto	Denise M Whitehead	Case number (if known)			
4.2	Baptist Med Ctr	Last 4 digits of account number	\$110.36		
	Nonpriority Creditor's Name		***		
	225 N State St	When was the debt incurred?			
	Jackson, MS 39201				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.3	Barclays Apple Visa	Last 4 digits of account number 9361	\$4,971.34		
	Nonpriority Creditor's Name				
	P. O. Box 8803	When was the debt incurred?			
	Wilmington, DE 19899 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply			
	_				
	Debtor 1 only	Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	\square Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.4	Capital One	Last 4 digits of account number 4949	\$1,090.68		
	Nonpriority Creditor's Name	When was the debt incurred?			
	POB 30281	when was the debt incurred?			
	Salt Lake Cit, UT 84130-0281 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	no of the date year me, the channel of contain that appri			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
		☐ Disputed			
	Debtor 1 and Debtor 2 only	•			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
		☐ Debts to pension or profit-sharing plans, and other similar debts			
	■ No	_			
	Yes	Other, Specify			

Debto	Denise M Whitehead	Case number (if known)	
4.5	Chase Amazon	Last 4 digits of account number 8429	\$4,000.00
	Nonpriority Creditor's Name P. O. Box 15369	When was the debt incurred?	
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Chase IHG	Last 4 digits of account number 3016	\$5,620.30
	Nonpriority Creditor's Name		<u> </u>
	P. O. Box 15369	When was the debt incurred?	
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.7	Citibank CBNA	Last 4 digits of account number 7245	\$1,487.00
	Nonpriority Creditor's Name	When was the debt incurred?	_
	POB 6241 Sioux Falls, SD 57117	when was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify	

Debtor 1 Denise M Whitehead		Case number (if known)				
4.8	Comenity Capital/HSN	Last 4 digits of account number 7419	\$656.83			
	Nonpriority Creditor's Name P. O. Box 182120	When was the debt incurred?				
	Columbus, OH 43218-2120	Then was the dest incurred.				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.9	Discover Card	Last 4 digits of account number 8089	\$9,053.20			
	Nonpriority Creditor's Name					
	P. O. Box 15316 Wilmington, DE 19850	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	_	☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.1	Discover Personal Loan	Last 4 digits of account number 4029	\$40.755.05			
0	Nonpriority Creditor's Name	Last 4 digits of account number 4029	\$12,755.95			
	P. O. Box 15316 Wilmington, DE 19850	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify				

Debtor	1 Denise M Whitehead	Case number (if known)			
4.1					
1	Home Depot	Last 4 digits of account number 5544	\$1,999.95		
	Nonpriority Creditor's Name P. O. Box 6497 Sioux Falls, SD 57117-6497	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	The same same same same same same same sam			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1					
2	Macy's	Last 4 digits of account number 2707	\$269.15		
	Nonpriority Creditor's Name P. O. Box 8058	When was the debt incurred?			
	Mason, OH 45040-8058				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	Other. Specify			
	165	Other. Specify			
4.1	Medicomp Physical Ther		\$656.10		
3	Nonpriority Creditor's Name	Last 4 digits of account number	φυσυ.10		
	d/b/a EnduraCare Acute P. O. Box 654188	When was the debt incurred?			
	Dallsa, TX				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes				
	⊔ Yes	Other. Specify			

Debte	Denise M Whitehead	Case number (if known)			
4.1					
4	Progressive Leasing	Last 4 digits of account number 1344	\$1,564.86		
	Nonpriority Creditor's Name 256 W Data Drive Draper, UT 84020	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1	Prosper Marketplace	Last 4 digits of account number 8832	\$4,310.87		
5	Nonpriority Creditor's Name		+ 1,010101		
	221 Main St, Ste 300	When was the debt incurred?			
	San Francisco, CA 94105	As of the date you file, the claim is: Check all that apply			
	Number Street City State Zip Code Who incurred the debt? Check one.				
	_	Пол			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes				
	☐ fes	Other. Specify			
4.1 6	QVC	Last 4 digits of account number 3925	\$392.02		
	Nonpriority Creditor's Name				
	P. O. Box 965005	When was the debt incurred?			
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	7.6 of the date you me, the stall the officer all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify			
		-· - =p==:/			

Debtor	1 Denise M Whitehead	Case number (if known)			
4.1					
4.1 7	Regions Credit Line	Last 4 digits of account number	\$1,000.00		
	Nonpriority Creditor's Name P. O. Box 11007 Birmingham, AL 35288-0002	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
Debtor 1 only		☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1	Republic Finance		\$6,670.00		
8	Nonpriority Creditor's Name	Last 4 digits of account number	\$0,070.00		
	26 Holiday Rambler	When was the debt incurred?			
	Lane				
	Byram, MS 39272	As of the date way file the plates to Oheak all that such			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1	SYNCB/Belk	Last 4 digits of account number 8454	\$70.92		
9	Nonpriority Creditor's Name	Last 4 digits of account number 8454	\$10.92		
	POB 530940	When was the debt incurred?			
	Atlanta, GA 30353-0940				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			

Debtor	1 Denise M Whitehead	Case number (if known)	
4.2	SYNCB/JC Penny	Last 4 digits of account number 0251	\$471.92
	Nonpriority Creditor's Name POB 9600090	When was the debt incurred?	
	Orlando, FL 32896		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	SYNCB/Lowes	Last 4 digits of account number 1376	\$472.35
	Nonpriority Creditor's Name POB 965005	When was the debt incurred?	
	Orlando, FL 32896		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	SYNCB/Walmart	Last 4 digits of account number 8608	\$793.39
2	Nonpriority Creditor's Name		********
	POB 530927	When was the debt incurred?	
	Atlanta, GA 30353		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	□ Occasion const.	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	_	<u> </u>	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1 Denise M Whitehead Case number (if known)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,339.92
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 59,339.92

Fill in this information to identify your case:					
Debtor 1 Denise M Whitehead					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number _					☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Company with Name, Number	whom you have the Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	*				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Fill in this in	nformation to identify your	case:		
Debtor 1	Denise M Whitehe	ead		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)) First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number	er			☐ Check if this is an amended filing
	Form 106H ule H: Your Cod	ebtors		12/15
people are fi fill it out, and your name a	iling together, both are equ	ally responsible for sup boxes on the left. Attac . Answer every question	plying correct informati h the Additional Page to n.	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor.
■ No	,		·	
Arizona,	n the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	Nevada, New Mexico, Pu	uerto Rico, Texas, Washi	y? (Community property states and territories include ngton, and Wisconsin.)
in line 2	? again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarar	ntor or cosigner. Make s	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fil
	olumn 1: Your codebtor ame, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	ame Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
Ci	umber Street ty	State	ZIP Code	
3.2 Na	ame			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
Nu Ci	umber Street ty	State	ZIP Code	

Fill	in this information t	o identify your ca	ase:							
Del	otor 1	Denise M WI	nitehead							
	otor 2 ouse, if filing)									
Uni	ted States Bankrup	tcy Court for the	SOUTHERN DISTRIC	T OF MISSISSIPPI						
(If kr	se number	1061					13 incor	nded filing ement showin ne as of the fo	ng postpetition cha ollowing date:	pter
	chedule I:		ama				MM / DE)/ YYYY		12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any additi	ng jointly, and your s th you, do not includ	pouse e infor	is liv matio	ing with you, in about your	nclude inforr spouse. If m	mation about you ore space is need	ır ded,
1.	Fill in your empl information.	oyment		Debtor 1			Debte	or 2 or non-fi	iling spouse	
	If you have more attach a separate information about	page with	Employment status	■ Employed□ Not employed				nployed It employed		
	employers.		Occupation	Legal Assistant						
	Include part-time, self-employed wo		Employer's name	Office Of State P	ublic l	Defe	nder			
	Occupation may i or homemaker, if		Employer's address	160 S President Jackson, MS 392						
			How long employed the	here? 16 years	3					_
		tails About Mor	•							
	mate monthly incouse unless you are		ate you file this form. If y	you have nothing to re	port for	any I	ine, write \$0 in	the space. In	clude your non-filir	ng
	ou or your non-filing e space, attach a so		re than one employer, co	ombine the information	for all	emplo	oyers for that pe	rson on the li	nes below. If you i	need
							For Debtor 1		btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	4,083.3	3 \$	N/A	
3	Estimate and lis	t monthly overti	me nav		3	⊥ ¢	0.0	0 4\$	N/A	

4,083.33

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	otor 1	Denise M Whitehead	-		Case	e number (if kn	own)				
					Fo	r Debtor 1			r Debtor n-filing s		
	Cop	y line 4 here	4.		\$_	4,083	.33	\$	9	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	а.	\$	779	17	\$		N/A	
	5b.	Mandatory contributions for retirement plans		b.	\$	367		\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$	100		\$		N/A	_
	5d.	Required repayments of retirement fund loans		d.	\$.00	\$		N/A	
	5e.	Insurance	56	e.	\$	330		\$		N/A	_
	5f.	Domestic support obligations	5f	f.	\$.00	\$		N/A	\ \
	5g.	Union dues	5	g.	\$	0	.00	\$		N/A	<u> </u>
	5h.	Other deductions. Specify:	_ 5l	h.+	\$_	0	.00	+ \$ _		N/A	<u> </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,576	.67	\$_		N/A	<u>.</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,506	.66	\$_		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	Ω·	a.	\$	0	.00	\$		NI/A	
	8b.	Interest and dividends		а. b.	\$ \$.00	\$-		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$.00	\$		N/A	_
	8d.	Unemployment compensation	80	d.	\$	0	.00	\$		N/A	<u> </u>
	8e.	Social Security	86	е.	\$	0	.00	\$		N/A	<u> </u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f _ 8g		\$_ \$.00	\$ \$		N/A N/A	_
	8h.	Other monthly income. Specify: Part Time Job		y. h.+	٠ –			+ \$		N/A	
	011.	Tar Time Job	_ "	г	Ψ_ ———	333	.00	· —			<u>`</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	559	.00	\$_		N/	Α
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,065.66	+ \$		N/A	= \$	3,065.66
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		0,000.00	*		1473		0,000.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			•			Schedul	e <i>J</i> . +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies							e. 12.	\$	3,065.66
13.	Do.	you expect an increase or decrease within the year after you file this form	2							Combi month	ined ly income
13.		No. Yes Explain:									

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:							
Deb	tor 1	Denise M WI	hitehead			Ch	eck if this	is:		
		Definse in Wi	interieuu			о. П		nded filing		
Deb	tor 2						A supple	ement shov	ving postpetition cha	apter
(Spc	ouse, if filing)						13 expe	nses as of	the following date:	
Unite	ed States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF MISS	ISSIPPI		MM / DI	O / YYYY		
Case	e number									
(If kr	nown)									
Of	fficial Fo	rm 106J								
Sc	hedule	J: Your	Fyner	1696						12/15
				If two married people ar	e filing together, he	oth are e	nually reci	onsible fo	or supplying correc	
info	ormation. If m		eded, atta	ch another sheet to this						
Pari	t 1: Descr	ibe Your House	hold							
1.	Is this a join									
	■ No. Go to	line 2.								
	☐ Yes. Doe	s Debtor 2 live	in a separ	ate household?						
	□N	0								
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebtor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Depe age	endent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
2	Do your own	enses include	_						☐ Yes	
3.		f people other t	han	No						
		d your depende		Yes						
Daw	t O. Fotim	-t- V O	Ma	h. F						
Esti exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp						
				government assistance in cluded it on Schedule I: Y						
	ficial Form 10		u		our moomo			Your exp	enses	
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	4.	\$		938.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	\$		0.00	
				ipkeep expenses		4c.			0.00	
_		owner's associat				4d.			0.00	
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

Debtor 1	Denise N	M Whitehead	Case num	ber (if known)	
S. Utili	ties:				
6a.		heat, natural gas	6a.	\$	225.00
6b.	•	ver, garbage collection	6b.		30.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.		90.00
6d.		ecify: Cable	6d.	·	200.00
		ekeeping supplies	7.	·	280.00
		hildren's education costs	8.	\$	0.00
		ry, and dry cleaning	9.	\$	95.00
	-	roducts and services	10.	\$	43.00
	•	ntal expenses			
		•	11.	\$	200.00
	•	Include gas, maintenance, bus or train fare. ar payments.	12.	\$	100.00
		clubs, recreation, newspapers, magazines, and boo		·	25.00
		ributions and religious donations	14.	·	25.00
i. Insu		indulons and rengious donations	14.	Ψ	23.00
		surance deducted from your pay or included in lines 4	or 20		
	Life insura	, , ,	or 20. 15a.	\$	0.00
	Health ins		15b.	· -	0.00
	Vehicle in		15c.	·	188.00
		rance. Specify:	15d.	·	0.00
		clude taxes deducted from your pay or included in line		Ψ	0.00
Spe		cidue taxes deducted from your pay or included in line:	5 4 01 20. 16.	\$	0.00
	-	ease payments:		<u> </u>	0.00
		ents for Vehicle 1	17a.	\$	488.00
		ents for Vehicle 2	17b.	· · · — — — — — — — — — — — — — — — — —	0.00
		ecify: Vanderbilt Mortgage	17c.	·	114.00
	Other. Spe		17d. 17d.		0.00
		of alimony, maintenance, and support that you did		Ψ	0.00
		your pay on line 5, Schedule I, Your Income (Officia		\$	0.00
		s you make to support others who do not live with		\$	0.00
Spe			19.		
	·	erty expenses not included in lines 4 or 5 of this for	m or on Schedule I: Yo	our Income.	
		on other property	20a.		0.00
20b.	Real estat	e taxes	20b.	\$	0.00
20c.	Property, I	nomeowner's, or renter's insurance	20c.	· ·	0.00
		ice, repair, and upkeep expenses	20d.		0.00
		er's association or condominium dues	20e.		0.00
				+\$	
. Juli	er: Specify:			- Ψ	0.00
. Calc	culate your	monthly expenses			
22a.	Add lines 4	through 21.		\$	3,041.00
22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$	
		a and 22b. The result is your monthly expenses.		\$	3,041.00
		, , , ,			5,071.00
		monthly net income.			
23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,065.66
23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	3,041.00
				-	•
23c.		our monthly expenses from your monthly income.		•	04.00
	The result	is your monthly net income.	23c.	\$	24.66
			, an		
		an increase or decrease in your expenses within the ou expect to finish paying for your car loan within the year or do			or docroses because a
		iu expect to finish paying for your car loan within the year or do terms of your mortgage?	you expect your mortgage	payment to increase	on decrease because o
		Fundain have			
ΠY	'es.	Explain here:			

Fill in this infor	mation to identify your	case:			
Debtor 1	Denise M Whitehe	ead			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	riist name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Forr Declarat		n Individual	Debtor's Sc	hedules	12/15
obtaining money		n connection with a bank			t, concealing property, or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	d with this declaration an	d
X /s/ Den	nise M Whitehead		X		
Denise	e M Whitehead re of Debtor 1		Signature of D	Debtor 2	
· ·	August 9, 2019		Date		

Fill in	this inform	ation to identify you	r case:						
Debto	or 1	Denise M Whiteh	nead						
		First Name	Middle Name	Last Name					
Debto (Spouse	or 2 e if, filing)	First Name	Middle Name	Last Name					
United	d States Ban	kruptcy Court for the:	SOUTHERN DISTRICT (OF MISSISSIPPI					
Casa	number								
(if know						Check if this is an mended filing			
Oπ:	aial Fam	una 407							
	cial For		Affaire for Individ	duals Filing for B	ankruntov	4/40			
						4/19			
inform	ation. If mo	ore space is needed,	attach a separate sheet to		equally responsible for sup y additional pages, write you				
). Answer every ques							
Part 1	Give D	etails About Your Ma	rital Status and Where You	Lived Before					
1. W	/hat is your	current marital statu	is?						
	Married								
	Not marr	ied							
2. D	During the last 3 years, have you lived anywhere other than where you live now?								
	No								
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
Γ	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there			
					ity property state or territor				
states	and territorie	es include Arizona, Ca	iifornia, idano, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and W	visconsin.)			
	No No	CH and Oak		(('a'al Farra 400LI)					
	J Yes. Mai	ce sure you fill out Scr	nedule H: Your Codebtors (O	fficial Form 106H).					
Part 2	Explair	the Sources of You	r Income						
F	ill in the total	amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part e together, list it only once ur		ndar years?			
] No								
	-	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	January 1	of current year until	1 \\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$28,583.31	☐ Wages, commissions,				
the d	•	for bankruptcy:	■ Wages, commissions, bonuses, tips	Ψ20,000.01	bonuses, tips				

Official Form 107

Debtor 1 Denise M Whitehead					Case number (if known)						
				Debtor 1		Debtor 2					
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)			
		dar year: December :	31, 2018)	■ Wages, commissions, bonuses, tips	\$40,315.00	☐ Wages, components, tips	missions,				
				☐ Operating a business		☐ Operating a b	ousiness				
		lar year bei December		■ Wages, commissions, bonuses, tips	\$40,168.00	☐ Wages, comi bonuses, tips	missions,				
				☐ Operating a business		☐ Operating a b	ousiness				
	st each s	•	he gross inco	e and you have income that y		that you listed in line					
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)			
Part 3	List	Certain Pa	vments You	Made Before You Filed for	,						
6. Ai	No.	Neither Deindividual puring the No. Yes	potent of the part	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the on 4/01/22 and every 3 years r both have primarily consure you filed for bankruptcy, di	Imer debts. Consumer debted purpose." d you pay any creditor a total d a total of \$6,825* or more ats for domestic support oblinis bankruptcy case. Is after that for cases filed on timer debts. d you pay any creditor a total d a total of \$600 or more an	al of \$6,825* or mor in one or more paying gations, such as chi or after the date of al of \$600 or more?	e? ments and the stand the support a standard adjustment would be some the standard that the standard the sta	ne total amount you nd alimony. Also, do			
C	reditor's	s Name and	l Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	payment for			

Del	btor 1 Denise M Whitehead		Cas	se number (if known)					
7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pof which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gent control, or owner of 20%	neral partners; partners or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for			
	■ No□ Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		yments or transfer a	any property on a	ccount of a d	ebt that benefited an			
	No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name			
Pai	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case			
	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.								
	No. Go to line 11.Yes. Fill in the information below.								
	Creditor Name and Address	Describe the Property		Date		Value of the property			
		Explain what happene							
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No		cluding a bank or fii	nancial institution	, set off any a	amounts from your			
	Yes. Fill in the details. Creditor Name and Address	Describe the action th	e creditor took	Date	action was	Amount			
				taken					
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a			
	■ No □ Yes								
Pai	rt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup ■ No	ptcy, did you give any gif	ts with a total value	of more than \$60	0 per person	?			
	Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value			
	Person to Whom You Gave the Gift and Address:								

Der	Denise M Whitehead		Ca	ase number (if known)					
4.	Within 2 years before you filed for bankr	ruptcy,	did you give any gifts or contributions	with a total	value of more than	600 to any charity?				
	No									
	Yes. Fill in the details for each gift or o				Detection	Value				
	Gifts or contributions to charities that more than \$600 Charity's Name	totai	Describe what you contributed		Dates you contributed	Value				
	Address (Number, Street, City, State and ZIP Cod	le)								
Par	t 6: List Certain Losses									
5.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?									
	■ No									
	Yes. Fill in the details.									
	Describe the property you lost and	Descr	ibe any insurance coverage for the los	SS	Date of your	Value of property				
	how the loss occurred		e the amount that insurance has paid. List nce claims on line 33 of <i>Schedule A/B: F</i>		loss	lost				
Par	t 7: List Certain Payments or Transfer	s								
7.	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition process. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Within 1 year before you filed for bankrupromised to help you deal with your crees.	You lptcy, d ditors c	Description and value of any prope transferred id you or anyone else acting on your lor to make payments to your creditors	rty behalf pay o	Date payment or transfer was made	Amount of payment ty to anyone who				
	Do not include any payment or transfer that you listed on line 16. ■ No □ Yes. Fill in the details.									
	Person Who Was Paid		Description and value of any prope	rty	Date payment	Amount of				
	Address		transferred	•	or transfer was made	payment				
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have also not not not not not not not not not no	u r busir s made	ness or financial affairs? as security (such as the granting of a sec							
	Person Who Received Transfer		Description and value of	Describe a	iny property or	Date transfer was				
	Address		property transferred		received or debts	made				
	Person's relationship to you									
9.	Within 10 years before you filed for bank beneficiary? (These are often called asser ■ No □ Yes. Fill in the details.			lf-settled tru	st or similar device o	of which you are a				
	Name of trust		Description and value of the proper	tv transferra	ed	Date Transfer was				
	Name of trust Description and value of the property transferred									

Debtor 1 Denise M Whitehead Case number (if known)

Par	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Sto	orage Units	S				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	J		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, an	y safe dep	osit box or other deposit	ory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe t	he contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe t	he contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	■ No								
	Yes. Fill in the details.				h a manageta	Walna			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	he property	Value			
Par	t 10: Give Details About Environmental Inf	ormation							
For	the purpose of Part 10, the following definiti	ons apply:							
	Environmental law means any federal, state toxic substances, wastes, or material into tregulations controlling the cleanup of these	he air, land, soil, surfa	ce water, ground						
	Site means any location, facility, or propert to own, operate, or utilize it, including disp	-	environmental la	aw, whethe	er you now own, operate,	or utilize it or used			
	Hazardous material means anything an envi hazardous material, pollutant, contaminant		as a hazardous	waste, haz	zardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings th	at you know about, reç	jardless of when	they occu	rred.				
24.	Has any governmental unit notified you that	t you may be liable or լ	ootentially liable	under or ir	n violation of an environm	nental law?			
	■ No □ Yes. Fill in the details.								
						Date of notice			

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 34 of 53

Deb	otor	Denise M Whitehead		Cas	e number (if known)						
25.	Ha	ve you notified any governmental unit o	f any release of hazardous material?								
	_	,									
		No Yes. Fill in the details.									
	LI Na	me of site	Governmental unit		Environmental law, if you	Date of notice					
		Idress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		know it	Date of Hotice					
26.	Ha	ve you been a party in any judicial or ad	ministrative proceeding under any envir	ronm	nental law? Include settlements	and orders.					
		No									
		Yes. Fill in the details.									
		ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case					
Par	t 11	Give Details About Your Business or	Connections to Any Business								
					the fellowing connections to a	w husiness?					
27.	VVII	<u> </u>	tcy, did you own a business or have any	-	_	iy business?					
		<u> </u>	in a trade, profession, or other activity,		-						
			pany (LLC) or limited liability partnershi	b (Li	LP)						
		☐ A partner in a partnership									
		☐ An officer, director, or managing executive of a corporation									
		☐ An owner of at least 5% of the voting or equity securities of a corporation									
		No. None of the above applies. Go to	Part 12.								
		Yes. Check all that apply above and fill in the details below for each business.									
		usiness Name	Describe the nature of the business		Employer Identification number						
		Idress umber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security Dates business existed	/ number or IIIN.					
28.	Wit	ithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial stitutions, creditors, or other parties.									
	_	, , , , , , , , , , , , , , , , , , , ,									
		No Yes. Fill in the details below.									
	LI Na	me	Date Issued								
	Ad	ddress	Jule locaeu								
		ımber, Street, City, State and ZIP Code)									
Par	t 12	: Sign Below									
are i	true a b	and correct. I understand that making a	nancial Affairs and any attachments, and false statement, concealing property, concealing property and concealing property.	or ob	taining money or property by f						
/s/	Dei	nise M Whitehead	_								
	_	e M Whitehead ure of Debtor 1	Signature of Debtor 2								
Dat		August 9, 2019	Date								
Did ■ N □ Y	lo	attach additional pages to Your Statem	ent of Financial Affairs for Individuals F	iling	for Bankruptcy (Official Form	107)?					
_	-	pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy	forms?						
■ N □ Y		Name of Person Attach the Bankri	uptcy Petition Preparer's Notice, Declaratio	on. ai	nd Signature (Official Form 119)						
			nent of Financial Affairs for Individuals Filing		• ,	page (

19-02864-NPO Dkt 3 Filed 08/09/19 Entered 08/09/19 14:32:21 Page 35 of 53

Debtor 1	Denise M Whitehead	Case number (if known)	

Fill in this infor	mation to identify your	case:		
Debtor 1	Denise M Whitehe	ead		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DIS	TRICT OF MISSISSIPPI	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Stateme	nt of Intentio	n for Indiv	viduals Filing Under Chap	ter 7
	ividual filing under chap	-	Il out this form if:	
_	e claims secured by you		and avaired	
You must file thi	sed personal property a is form with the court w	ithin 30 days after	you file your bankruptcy petition or by the date	set for the meeting of creditors,
whiche	•	e court extends th	ne time for cause. You must also send copies to	the creditors and lessors you list
		in - inint b.		tinformation Dath dahtara must
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying correct	t information. Both deptors must
Be as complete	and accurate as possib	le. If more space i	s needed, attach a separate sheet to this form. C	On the top of any additional pages.
	our name and case num			
Part 1: List Y	our Creditors Who Have	Secured Claims		
1 For any credit	ore that you listed in Br	urt 1 of Schodulo I	D: Creditors Who Have Claims Secured by Prope	arty (Official Form 106D) fill in the
information be	elow.		• •	,
Identify the cr	editor and the property the	nat is collateral	What do you intend to do with the property the secures a debt?	nat Did you claim the property as exempt on Schedule C?
				and the second s
Creditor's F	ord Motor Credit Co		☐ Surrender the property.	□No
name:	ora motor orcan oo		☐ Retain the property and redeem it.	LI NO
Description of	2015 Ford Escape		■ Retain the property and enter into a	■ Yes
property	2013 Foru Escape		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:			Li Retain the property and [explain].	
Creditor's L	JS Bank Home Mortg	ane	☐ Surrender the property.	□No
name:	o Bank Home Mortg	age	Retain the property and redeem it.	LI NO
Description of	200 Mallary Drive I	Dyrom MS	Retain the property and enter into a	■ Yes
property	309 Mallory Drive I 39272 Hinds Coun		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	:		- Rotain the property and [explain].	
	anderbilt Mortgage		☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	

Official Form 108

property

Description of Windows

Statement of Intention for Individuals Filing Under Chapter 7

■ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Yes

Debtor 1 Denise M Whitehead	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property Leases	
For any unexpired personal property lease that you listed in Sch	needule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill and leases are leases that are still in effect; the lease period has not yet ended lease does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my inten- property that is subject to an unexpired lease.	tion about any property of my estate that secures a debt and any personal
X /s/ Denise M Whitehead	Y
Denise M Whitehead Signature of Debtor 1	Signature of Debtor 2
DateAugust 9, 2019	Date

						
Fill in this i	nformation to identify your case:				as directed in this form an	id in Form
Debtor 1	Denise M Whitehead			2A-1Supp:		
Debtor 2 (Spouse, if filir				☐ 1. There is no p	presumption of abuse	
United Sta	es Bankruptcy Court for the: Southern District of	Mississippi			on to determine if a presu be made under <i>Chapter</i> 7	
Case numb	per			Calculation	(Official Form 122A-2).	
(if known)					Test does not apply now be itary service but it could a	
				☐ Check if this	is an amended filing	
Official	Form 122A - 1					
Chapte	er 7 Statement of Your Cur	rent Mor	nthly Inc	ome		12/15
attach a sep case numbe	ete and accurate as possible. If two married people a arate sheet to this form. Include the line number to wi r (if known). If you believe that you are exempted fron ilitary service, complete and file Statement of Exempte Calculate Your Current Monthly Income	nich the additior n a presumption	nal information a of abuse becau	applies. On the top use you do not have	of any additional pages, wr primarily consumer debts	ite your name and or because of
1. What	is your marital and filing status? Check one onl	у.				
■ No	t married. Fill out Column A, lines 2-11.	•				
	rried and your spouse is filing with you. Fill ou	t both Columns	A and B. lines	2-11.		
	rried and your spouse is NOT filing with you.					
	Living in the same household and are not legal	•	•	lumns A and B. lir	ies 2-11.	
	Living separately or are legally separated. Fill o	-				ou declare under
_	penalty of perjury that you and your spouse are le living apart for reasons that do not include evadin	gally separated	d under nonban	kruptcy law that a	pplies or that you and you	
101(10A) the 6 mor	e average monthly income that you received from all s For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total lown the same rental property, put the income from that pr	onth period would by 6. Fill in the re	be March 1 throi sult. Do not includ	ugh August 31. If the de any income amou	amount of your monthly incont more than once. For exam	me varied during ple, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, a ll deductions).	and commission	ons (before all	\$ 4,267.6	52 \$	_
	ony and maintenance payments. Do not include part B is filled in.	payments from	a spouse if	\$ 0.0	00 \$	_
of you from a and ro	nounts from any source which are regularly pa u or your dependents, including child support. In unmarried partner, members of your household commates. Include regular contributions from a spon. Do not include payments you listed on line 3.	Include regular your depende	contributions nts, parents,	\$0.0	00 \$	
5. Net ir	come from operating a business, profession, o					
			otor 1			
	receipts (before all deductions)	\$ 0.00				
	ary and necessary operating expenses	-\$ 0.00	Copy here ->	\$ 0.0	0 \$	
	onthly income from a business, profession, or farm	1\$	Copy Here ->	φ	Φ	
6. Net ir	come from rental and other real property	Deh	otor 1			
Gross	receipts (before all deductions)	\$ 0.00				
	ary and necessary operating expenses	-\$ 0.00				
	onthly income from rental or other real property	·	Copy here ->	\$ 0.0	0 \$	
	est, dividends, and royalties	*		\$ 0.0	\$	
	,					

Official Form 122A-1

					Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemplo	yment compensation			\$	0.00	\$	•	
		ter the amount if you contend that the amount I Security Act. Instead, list it here:	t received was a benef	it under			·		
	For you	· · · · · · · · · · · · · · · · · · ·	0.0	00					
	For you	ur spouse \$							
9.	Pension	or retirement income. Do not include any am	nount received that was	s a	\$	0.00	\$		
10.	Do not in received	rom all other sources not listed above. Speclude any benefits received under the Social Sas a victim of a war crime, a crime against hur terrorism. If necessary, list other sources on aw.	Security Act or paymen manity, or international	ts or					
					\$	0.00	\$		
	_				\$	0.00	\$		
	•	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.		e your total current monthly income. Add linmn. Then add the total for Column A to the to		\$	4,267.62	+ \$		= \$	4,267.62
Pari	2. Da	etermine Whether the Means Test Applies t	o Vou					Total o	current monthly e
гаг	- Z-	termine whether the Means Test Applies t	0 10u						
12	Calculate	e your current monthly income for the year.	. Follow these steps:						
	12a. Cop	y your total current monthly income from line 1	1		Сор	y line 11 l	nere=>	\$	4,267.62
		iply by 12 (the number of months in a year)						X	
	12b. The	result is your annual income for this part of the	e form				12b.	\$	51,211.44
13.	Calculate	e the median family income that applies to	you. Follow these step	s:					
	Fill in the	state in which you live.	MS						
		number of people in your household.	1						
	To find a	median family income for your state and size list of applicable median income amounts, go rm. This list may also be available at the bank	online using the link sp	ecified	in the separa	ate instruc	13. tions	\$	42,183.00
14.	How do t	he lines compare?							
	14a. 🛚	Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, There is	no presum	ption of abuse).	
	14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pre	esumption of	f abuse is	determined by	Form 1.	22A-2.
Part	3: Si	gn Below							
	By s	igning here, I declare under penalty of perjury	that the information or	n this sta	atement and	in any atta	achments is tru	ue and c	orrect.
		/ Davis a MANAULitak and				·			
	D	/ Denise M Whitehead enise M Whitehead							
	Date A	gnature of Debtor 1 ugust 9, 2019							
		M/DD/YYYY							
	If yo	u checked line 14a, do NOT fill out or file Forn	n 122A-2.						
	If yo	u checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Denise M Whitehead

Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Denise M Whitehead	lines 40 or 42:
Debtor 2	According to the calculations required by this Statement:
(Spouse, if filing)	
United States Bankruptcy Court for the: Southern District of Mississippi	■ 1. There is no presumption of abuse.
Cana sumb as	☐ 2. There is a presumption of abuse.
Case number(if known)	
	☐ Check if this is an amended filing
Official Form 122A - 2	2 Chook if the is an amenasa himg
Chapter 7 Means Test Calculation	04/1
To fill out this form, you will need your completed copy of Chapter 7 Statemer	ent of Your Current Monthly Income (Official Form 122A-1).
Be as complete and accurate as possible. If two married people are filing too	
space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known).	er to which additional information applies. On the top any
Part 1: Determine Your Adjusted Income	
Copy your total current monthly income. Copy line 11 f	rom Official Form 122A-1 here=> \$ 4,267.62
2. Did you fill out Column B in Part 1 of Form 122A-1?	
■ No. Fill in \$0 for the total on line 3.	
☐ Yes. Is your spouse Filing with you?	
□ No. Go to line 3.	
Yes. Fill in \$0 the total on line 3.	
Adjust your current monthly income by subtracting any part of your sp household expenses of you or your dependents. Follow these steps:	ouse's income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you rexpenses of you or your dependents?	eported for your spouse NOT regularly used for the household
No. Cill in 0 for the total on line 2	
■ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
State each purpose for which the income was used	Fill in the amount you
For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting from your spouse's income
	\$
	\$
	\$

Adjust your current monthly income. Subtract line 3 from line 1.

Total.

\$ 4,267.62

Copy total here=>... - \$ 0.00

0.00

art 2	Calculate Your Deductions from Your Income							
to a		Local Standards for certain expense amounts. Use these amounts and ards, go online using the link specified in the separate available at the bankruptcy clerk's office.						
you	r actual expenses if they are higher than the standards. D	s of your actual expense. In later parts of the form, you will use some of Do not deduct any amounts that you subtracted fro your spouse's that you subtracted from 122A-1.						
If yo	our expenses differ from month to month, enter the average	ge expense.						
Whe	enever this part of the from refers to you, it means both you	ou and your spouse if Column B of Form 122A-1 is filled in.						
5.	The number of people used in determining your ded	ductions from income						
	Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.							
Nati	ional Standards You must use the IRS Nationa	al Standards to answer the questions in lines 6-7.						
6.7.	Standards, fill in the dollar amount for food, clothing, and other items.							
Peo	ple who are under 65 years of age							
	7a. Out-of-pocket health care allowance per person	\$55.00						
	7b. Number of people who are under 65	X1						
	7c. Subtotal. Multiply line 7a by line 7b.	\$55.00 Copy here=> \$55.00						
Peo	ple who are 65 years of age or older							
	7d. Out-of-pocket health care allowance per person	\$ <u>114.00</u>						
	7e. Number of people who are 65 or older	×						
	7f. Subtotal. Multiply line 7d by line 7e.	\$ Copy here=> +\$ 0.00						
	7g. Total. Add line 7c and line 7f	\$ 55.00 Copy total here=> \$ 55.00						

Denise M Whitehead

ebtor 1	C	Denise M	l Whitehead					Case number	(if known)				
Loc	al St	andards	You must us	e the IRS Loca	al Standards to ar	nswer the	questions in line	es 8-15.					
			ation from the oses into two		Trustee Prograr	n has divi	ided the IRS L	ocal Stand	ard for ho	ousin	g for		
I	Hous	ing and u	ıtilities - Insur	ance and ope	rating expenses	;							
— F	Hous	ing and u	ıtilities - Morto	gage or rent e	xpenses								
To a	answ	er the qu	estions in line	es 8-9, use the	e U.S. Trustee Pr	rogram ch	nart.						
					ied in the separat tcy clerk's office.	e instruction	ons for this forr	n.					
8.					perating expense for insurance and						5, fill \$		491.00
9.	Ηοι	using and	l utilities - Mo	rtgage or rent	expenses:								
	9a.				red in line 5, fill in rent expenses				\$	(699.00		
	9b.	Total av	erage monthly	payment for al	ll mortgages and	other debt	s secured by y	our home.					
		contract		ich secured cre	y payment, add a editor in the 60 mo								
		Name of	f the creditor			Averag	e monthly nt						
		US Bar	nk Home Mo	rtgage		\$	938.00						
			То	ital average mo	onthly payment	\$	938.00	Copy here=>	-\$		938.00	Repeat this amount on line 33a.	
	9c.	Net more	tgage or rent e	expense.									
					<i>ly payment</i>) from s than \$0, enter \$			\$	O	.00	Copy here=>	\$	0.00
10.	•			•	am's division of expenses, fill in				g is inco	rrect	and	\$	0.00
	Ex	plain why	:										
11.	Loc	al transp	ortation expe	nses: Check th	he number of veh	icles for w	hich you claim	an ownersh	nip or ope	rating	expense.		
	П	D. Go to lir	ne 14										
	_	1. Go to lir											
			Go to line 12.										
		_ 00.0.	_ U .UU 1Z.										

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

210.00

13.	You n	nay ı		the ex			sing the IRS Local oot make any loan									
Vel	hicle 1	I	Describ	e Vehi	cle 1:	2015 Fo	rd Escape									
13a.	Owne	ership	o or leas	ing cos	ts usin	g IRS Loca	al Standard				\$		508.00			
13b.		-	nonthly p clude cos	-			cured by Vehicle 1									
	are co	ontra		lue to e	ach se		t here and on line litor in the 60 mon			at						
	Name of each creditor for Vehicle 1 Average month payment				•											
	F	Ford	d Motor	r Cred	it Co			\$	195.20							
					Total A	verage M	onthly Payment	\$	195.20		opy ere =>	-\$	19	- 20	Repeat this amount on ine 33b.	
13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0,), enter (\$0		\$		312.80	Vehi	y net cle 1 ense => \$	312.80				
Ve	hicle 2	2	Describ	e Vehi	cle 2:											
13d.	Owne	ership	o or leas	ing cos	ts usin	g IRS Loca	al Standard				\$		0.00			
13e.			nonthly ր hicles.	oaymen	it for al	debts sec	cured by Vehicle 2	. Do not	t include costs fo	or						
	1	Nam	e of eac	h cred	itor for	Vehicle 2	2	Avera paym	age monthly nent							
	_							_ \$								
					Total A	verage M	onthly Payment	\$			opy ere > -\$ _		0.0	amo	eat this ount on line	
13f.				•		e expense f this amo	unt is less than \$0), enter (\$0		\$		0.00	Vehi	y net cle 2 ense => \$	0.00
14.							aimed 0 vehicles in ess of whether yo				l Stand	lards	, fill in the	Public	* *	0.00
15.	also d	dedu	ct a publ	lic trans	portati	on expens	se: If you claimed e, you may fill in w d for <i>Public Trans</i>	vhat you	u believe is the a							0.00

Denise M Whitehead

Debtor 1 Denise M Whitehead Case number (if known)

Oth	• •	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, Soc from your pay for these taxe	nount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld is. However, if you expect to receive a tax refund, you must divide the expected refund by r from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	779.17
17.	Involuntary deductions: Toontributions, union dues, a	he total monthly payroll deductions that your job requires, such as retirement nd uniform costs.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	367.50
18.	Life Insurance: The total m filling together, include paym insurance on your dependenterm.	\$	0.00	
19.		The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	lly amount that you pay for education that is either required:		
		ntally challenged dependent child if no public education is available for similar services.	\$	0.00
04		y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	· -	
21.	Do not include payments for	\$	0.00	
22.	Additional health care expthat is required for the health	penses, excluding insurance costs: The monthly amount that you pay for health care hand welfare of you or your dependents and that is not reimbursed by insurance or paid Include only the amount that is more than the total entered in line 7.	·	
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependent	lephone services: The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of by your employer.		
		r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses al Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	2,942.47

Denise M Whitehead Debtor 1 Case number (if known) Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 293.04 Disability insurance 0.00 Health savings account 0.00 293.04 293.04 Total Do you actually spend this total amount? No. How much do you actually spend? 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential. 28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional 0.00 amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. 0.00 * Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 0.00 You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial 25.00

32. Add all of the additional expense deductions.

Add lines 25 through 31.

instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

318.04

\$

ebtor 1	Denise M Whitehead		Case nun	nber (if known)		
Dedu	actions for Debt Payment					
	or debts that are secured by an intere pans, and other secured debt, fill in lin	st in property that you own, including es 33a through 33e.	home mor	tgages, vehicle		
	o calculate the total average monthly pay reditor in the 60 months after you file for	yment, add all amounts that are contracto bankruptcy. Then divide by 60.	ually due to	each secured		
	Mortgages on your home:					verage monthly ayment
33a.	Copy line 9b here				.=> \$	938.00
	Loans on your first two vehicles:					
33b.	Copy line 13b here				=> \$	195.20
33c.					=> \$	0.00
33d.	List other secured debts:					
Name	of each creditor for other secured debt	Identify property that secures the deb	ot	Does payme include taxes insurance?		
				□ No		
	-NONE-			☐ Yes	¢	
		_			Φ	
				□ No		
					\$	
				□ No		
				☐ Yes	+\$	
		_			—————————————————————————————————————	
					Сору	
33e.	Total average monthly payment. Add lin	nes 33a through 33d	\$	1,133.20	total here=>	, \$ 1,133.20
		secured by your primary residence, a upport or the support of your depende				
	No. Go to line 35.					
	Yes. State any amount that you must	pay to a creditor, in addition to the payn				
	listed in line 33, to keep posses Next, divide by 60 and fill in the	sion of your property (called the cure am information below.	ount).			
Nam	ne of the creditor	Identify property that secures the debt		Total cure		Monthly cure
		The state of the s		amount		amount
-NC	DNE-			\$	÷60 = \$;
					· 	
					Сору	
			Total \$	0.00	total here=>	. \$0.00
	o you owe any priority claims such as re past due as of the filing date of you	s a priority tax, child support, or alimo r bankruptcy case? 11 U.S.C. § 507.	ny - that			
	No. Go to line 36.					
	Yes. Fill in the total amount of all of to ongoing priority claims, such as	hese priority claims. Do not include curre	nt or			
	Total amount of all past-due p	riarity alaima	\$	0.00	÷ 60 =	\$ 0.00
	rotal amount of all past-due p	ionly claims	¥_	0.00	- 00 =	Ψ

For more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Basins for this form. Bankruptcy Basics may also be availab	sics spe			ice.			
■ No.	Go to line 37.							
☐ Yes.	☐ Yes. Fill in the following information.							
Projected monthly plan payment if you were filing under Chapter 13 \$								
	Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	n Alabama	x					
	online using s list may also			C	opy total			
	er Chapter 13	\$			ere=> \$			
	of the deductions for debt payment. es 33e through 36.						\$	1,133.20
Total Deduc	tions from Income							
38. Add all d	of the allowed deductions.							
	ne 24, All of the expenses allowed under IRS e allowances	\$_	2,942.4	7				
Copy lir	ne 32, All of the additional expense deductions	\$_	318.0	4				
Copy lir	ne 37, All of the deductions for debt payment	+\$_	1,133.20	0				
	Total deductions	\$_	4,393.7	1	Copy total	here	=> \$ _	4,393.71
Part 3: De	termine Whether There is a Presumption of Abuse							
	e monthly disposable income for 60 months							
39a. Co	ppy line 4, adjusted current monthly income	\$_	4,267.6	2				
39b. Co	ppy line 38, Total deductions	- \$_	4,393.7	1_				
	onthly disposable income. 11 U.S.C. § 707(b)(2). ibtract line 39b from line 39a	\$_	-126.0		Copy here=>\$		-126.09	-
For the	next 60 months (5 years)					x 60		
						7		
39d. To	otal. Multiply line 39c by 60		\$	-7,5	565.40	Copy here=>	\$	-7,565.40
40. Find out	whether there is a presumption of abuse. Check the	box the	at applies:			_		
■ The I	line 39d is less than \$8,175*. On the top of page 1 of the	nis form	, check box 1, Th	nere is	no presu	ımption of	abuse. Go to	Part 5.
	line 39d is more than \$13,650*. On the top of page 1 o 4 if you claim special circumstances. Go to Part 5.	f this for	rm, check box 2,	There	is a pres	umption o	of abuse. You	ı may fill out
☐ The I	line 39d is at least \$8,175*, but not more than \$13,65	0*. Go t	o line 41.					
*Subject	to adjustment on 4/01/22, and every 3 years after that for	or cases	filed on or after	the da	ate of adju	ıstment.		

Denise M Whitehead

Debtor 1	Deni	se M Whitehead	Case	number (if known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled of <i>A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules</i> (Official Form 106Sum), you may refer to line 3b on that form.		\$ x .25]	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § $707(b)(2)(A)(i)(a)(b)$. ,	\$	Copy here=>	\$
		Multiply line 41a by 0.25				
25	% of y	ne whether the income you have left over after subtracting all allowed de our unsecured, nonpriority debt. e box that applies:	duc	tions is enough to pa	у	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> Part 5.	ere i	s no presumption of ab	use.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, che <i>mption of abuse.</i> You may fill out Part 4 if you claim special circumstances. The				
Part 4:	Giv	e Details About Special Circumstances				
		e any special circumstances that justify additional expenses or adjustm alternative? 11 U.S.C. § 707(b)(2)(B).	ents	s of current monthly i	ncome fo	or which there is no
■ N	o. Go	to Part 5.				
□ Y		in the following information. All figures should reflect your average monthly entry that is, You may include expenses you listed in line 25.	kper	nse or income adjustme	ent for ea	ach
	ne	u must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation ustments.				
	G			erage monthly expens	е	
			\$			
			\$			
			\$			
	_		\$			
Part 5:	Sig	n Below				
	By si	ning here, I declare under penalty of perjury that the information on this state	mer	nt and in any attachmer	ts is true	and correct.
	X /s/	Denise M Whitehead				
		nise M Whitehead nature of Debtor 1				
Da	`	gust 9, 2019				
	MN	M/DD/YYYY				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

	South	nern District of Mississipp)1		
In re	Denise M Whitehead		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE			` ,	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for service	
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have received			800.00	
	Balance Due			100.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed comp	pensation with any other person u	inless they are mem	bers and associate	s of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				ny law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy of	ease, including:	
ŀ	Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to	tement of affairs and plan which ors and confirmation hearing, and reduce to market value; exe	may be required; d any adjourned hea mption planning;	rings thereof;	d filing of
	reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho		and filing of moti	ons pursuant to	o 11 USC
5. I	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di any other adversary proceeding.			es, relief from s	tay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of th	ne debtor(s) in
Α	ugust 9, 2019	/s/ Bryant D. Guy			
D	ate	Bryant D. Guy 998			
		Signature of Attorney Bryant D Guy Atty			
		POB 10173	ut Luw 1 LLO		
		Jackson, MS 3928			
		601-969-6960 Fax			
		bdguylaw@yahoo Name of law firm	.com		
		Traine of taw firm			